

01-22-07

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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01/18/02

JCS58 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 555255012306
 First Inventor William D. CASTELL
 Title Unified Messaging System And...
 Express Mail Label No. EL647387685US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
 (Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
 See 37 CFR 1.27.
3. ☒ Specification [Total Pages 39]
 (preferred arrangement set forth below)
- Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 10]
5. Oath or Declaration [Total Pages]
- a. ☐ Newly executed (original or copy)
- b. ☐ Copy from a prior application (37 CFR 1.63 (d))
 (for continuation/divisional with Box 18 completed)
- i. ☐ **DELETION OF INVENTOR(S)**
 Signed statement attached deleting inventor(s)
 named in the prior application, see 37 CFR
 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
 Box Patent Application
 Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or
 Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
 (if applicable, all necessary)
- a. ☐ Computer Readable Form (CRF)
- b. Specification Sequence Listing on:
- i. ☐ CD-ROM or CD-R (2 copies); or
- ii. ☐ paper
- c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement of Power of Attorney
 (when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
 (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
 (if foreign priority is claimed)
16. ☐ Nonpublication Request under 35 U.S.C. 122
 (b)(2)(B)(i). Applicant must attach form PTO/SB/35
 or its equivalent.
17. ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No. _____

Prior application information:

Examiner:

Group Art Unit:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

or ☒ Correspondence address below

Name David B. Cochran, Esq.
 Jones, Day, Reavis & Pogue
 Address North Point, 901 Lakeside Ave
 City Cleveland State Ohio Zip Code 44114
 Country USA Telephone (216) 586-3939 Fax (216) 579-0212

Name (Print/Type) David B. Cochran, Esq. Registration No. (Attorney/Agent) 39,142
 Signature David B. Cochran Date 1/18/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JCS21 U.S. PTO

10/05/02

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PTO/SB/17 (10-01)

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**FEE TRANSMITTAL
for FY 2002**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 780.00

Complete if Known

Application Number

Filing Date

First Named Inventor

William D. CASTELL

Examiner Name

Group Art Unit

Attorney Docket No.

555255012306

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Number

501432 (555255012306)

Deposit
Account
Name

Jones Day Reavis & Pogue

- ☒
- Charge Any Additional Fee Required
-
- Under 37 CFR 1.16 and 1.17

- ☐
- Applicant claims small entity status.
-
- See 37 CFR 1.27

- 2.
- ☐
- Payment Enclosed:

- ☐
- Check
- ☐
- Credit card
- ☐
- Money
-
- Order
- ☐
- Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity Small Entity

Fee Fee Fee Fee Fee Description
Code (\$) Code (\$) Code (\$)

101 740 201 370 Utility filing fee

106 330 206 165 Design filing fee

107 510 207 255 Plant filing fee

108 740 208 370 Reissue filing fee

114 160 214 80 Provisional filing fee

Fee Paid

740.00

SUBTOTAL (1) (\$) 740.00

2. EXTRA CLAIM FEES

Total Claims	5	-20** =	0	x	18.00	=	0.00
Independent Claims	2	-3** =	0	x	84.00	=	0.00
Multiple Dependent							

Large Entity Small Entity

Fee Fee Fee Fee
Code (\$) Code (\$)

Fee Description

103 18 203 9 Claims in excess of 20

102 84 202 42 Independent claims in excess of 3

104 280 204 140 Multiple dependent claim, if not paid

109 84 209 42 ** Reissue independent claims
over original patent110 18 210 9 ** Reissue claims in excess of 20
and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code	Small Entity Fee Code	Fee (\$)	Fee (\$)	Fee (\$)	Fee Description	Fee Paid
105	130	205	65		Surcharge - late filing fee or oath	
127	50	227	25		Surcharge - late provisional filing fee or cover sheet	
139	130	139	130		Non-English specification	
147	2,520	147	2,520		For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*		Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*		Requesting publication of SIR after Examiner action	
115	110	215	55		Extension for reply within first month	
116	400	216	200		Extension for reply within second month	
117	920	217	460		Extension for reply within third month	
118	1,440	218	720		Extension for reply within fourth month	
128	1,960	228	980		Extension for reply within fifth month	
119	320	219	160		Notice of Appeal	
120	320	220	160		Filing a brief in support of an appeal	
121	280	221	140		Request for oral hearing	
138	1,510	138	1,510		Petition to institute a public use proceeding	
140	110	240	55		Petition to revive - unavoidable	
141	1,280	241	640		Petition to revive - unintentional	
142	1,280	242	640		Utility issue fee (or reissue)	
143	460	243	230		Design issue fee	
144	620	244	310		Plant issue fee	
122	130	122	130		Petitions to the Commissioner	
123	50	123	50		Processing fee under 37 CFR 1.17(q)	
126	180	126	180		Submission of Information Disclosure Stmt	
581	40	581	40		Recording each patent assignment per property (times number of properties)	40.00
146	740	246	370		Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370		For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370		Request for Continued Examination (RCE)	
169	900	169	900		Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 40.00

SUBMITTED BY

Name (Print/Type)

David B. Cochran

Registration No.
(Attorney/Agent)

39,142

Complete (if applicable)

Telephone

(216) 586-3939

Signature

David B. Cochran

Date

1/18/02

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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